



**REQUEST FOR  
WITHDRAWAL  
AS ATTORNEY OR AGENT**

Application Number	09/016,159
Filing Date	January 30, 1998
First Named Inventor	Jong Y. Lee
Group Art Unit	1647
Examiner Name	Hamud, Fozia M
Attorney Docket Number	L535.12-0001

To: Commissioner For Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above identified application.

The reasons for this request are:

Failure to pay one or more bills rendered by the practitioner for an unreasonable period of time.

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

**CORRESPONDENCE ADDRESS**

\_\_\_ Customer Number \_\_\_

OR

FIRM OR  
INDIVIDUAL NAME

Jong Y. Lee PhD.

Address

514 Huron Boulevard SE  
A-11

City

Minneapolis

State

Minnesota

Zip

55414

Country

U.S.A.

Telephone

612-379-2467

Fax

612-379-2467

Name

Anne M. Murphy signing on behalf of customer #00164

Signature

*Anne M. Murphy*

Date

*December 9, 2003*

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

**RECEIVED**  
DEC 18 2003  
TECH CENTER 1600/2900